## PUBLIC HEALTH COMMITTEE

## PUBLIC HEARING MARCH 20, 2013

RAISED BILL No. 6391 AAC THE PRACTICE OF ADVANCED PRACTICE REGISTERED NURSES.

Testimony of Lisa Cloutier, IN SUPPORT OF RAISED BILL No. 6391

Senator Gerratana, Representative Johnson, and members of the Committee

I am an APRN working in the area of mental health. I am board certified in both Adult and Child/Adolescent Mental Health nursing. In the course of my career I have worked in various capacities and have managed my own private practice for 8 years, serving both adults and children. I started outpatient practice while working for a psychiatrist in his private practice. He closed the practice after being involved in a malpractice suit. I had nothing to do with the case and suddenly my own practice was in jeopardy because I was losing my collaborative physician.

The physician arranged for his colleague to cover me while I found a replacement. I was able to contact a physician I had worked with in the past and things went well for a number of years. Without warning my practice was in jeopardy again. My collaborative physician (we were not in practice together) underwent a difficult divorce and closed the practice he shared with his spouse and took a job with a hospital. Again, I had to find another physician. At this point I was solely responsible for the care of over 200 patients.

Finding a new physician was daunting. The American Medical Association claims there are physicians available for collaboration but I did not find that to be an accurate statement. I phoned everyone I had ever crossed paths with and heard basicially the same thing "I'm not interested in the increased liability". Or they would only provide collaboration if I closed my own practice to work for them. I finally found a physician through a colleague. Again, hundreds of cases were in jeopardy because I had to find another physician and none of these situations were of my own doing!

I enjoy collaborating with physicians. I collaborate informally with physicians of all specialties while providing excellent care for my patients. I am not objecting to the idea of collaboration, I am objecting to the fact that my entire career is dependent on the signature of another professional. I was a victim of a malpractice suit (not my own) and a divorce (again not my own!) I am currently employed in a hospital based private practice so I believe my future is secure. If this physician leaves or retires my employer will provide me with a new physician to sign. I average 250 patient contacts a month and provide care for over 300 individuals. However, if again unexpected circumstances occur and I have to stop practicing because I lose my collaborative physician, those clients lose their access to immediate care.

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In light of our healthcare crisis this current arrangement does not make sense. I sincerely hope you will consider supporting the removal of this barrier to our practice. Nurse Practitioners provide an important service to our community and we have proven over 13 years in CT our capability of providing this care in an independent role.

Sincerely, Lisa Cloutier APRN East Granby, CT